

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 147903-1							
In re Application of Charles Steven KORMAN		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">Application Number 10/711,108</td> <td style="width: 50%; padding: 2px;">Filed August 24, 2004</td> </tr> <tr> <td colspan="2" style="padding: 2px;">For PV LAMINATE BACKPLANE WITH OPTICAL CONCENTRATOR</td> </tr> <tr> <td style="padding: 2px;">Art Unit 1795</td> <td style="padding: 2px;">Examiner Thanh Truc TRINH</td> </tr> </table>		Application Number 10/711,108	Filed August 24, 2004	For PV LAMINATE BACKPLANE WITH OPTICAL CONCENTRATOR		Art Unit 1795	Examiner Thanh Truc TRINH
Application Number 10/711,108	Filed August 24, 2004								
For PV LAMINATE BACKPLANE WITH OPTICAL CONCENTRATOR									
Art Unit 1795	Examiner Thanh Truc TRINH								
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.									
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ 540.00							
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ _____							
<input type="checkbox"/> A check in the amount of the fee is enclosed.									
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.									
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.									
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>070868</u> . I have enclosed a duplicate copy of this sheet.									
<input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.									
I am the									
<input type="checkbox"/> applicant /inventor.		_____ /Peter J. Rashid/ Signature							
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		_____ Peter J. Rashid Typed or printed name							
<input type="checkbox"/> attorney or agent of record. Registration number _____		_____ (810) 227-9077 Telephone number							
<input checked="" type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. <u>39,464</u>		_____ October 22, 2009 Date							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.									
<input type="checkbox"/> *Total of <u>1</u> forms are submitted.									

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: _____ Signature: _____ (Peter J. Rashid)